



Mira Costa High School Aquatics Junior Lifeguard Conditioning Program



Train to Pass the Jr. Lifeguard Swim Test and Conditioning Workout for Returning JGs

3 Sessions @ MCHS - Space is limited. Sign up by March 10, 2014

Session 1 (3 Week): March 17 - April 3 (Mon/Tues/Thurs) 5:30-6:30 pm - \$135

Session 2 (3 Week): April 14 - May 1 (Mon/Tues/Thurs) 5:30-6:30 pm - \$135

Session 3 (2 Week Conditioning): May 12 - May 22 (Mon/Tues/Thurs) 5:30-6:30 pm - \$90

Junior Guard Swim Test Dates and Information

Saturday, April 12, 2014 - Culver City Plunge

Saturday, April 26, 2014 - Culver City Plunge

Saturday, May 4, 2014 - Palisades Charter High School Pool

For information for the 2014 Jr. Lifeguard Program, go to <http://www.watchthewater.org/jg/>

Please make check payable to MBX Foundation, and mail check and form below to:

MBX - Attn: Joe Anderson

Bank of Manhattan

2141 Rosecrans Ave., Suite 1100

El Segundo, CA 90245

All participants must be at least 9 years old by July 1, 2014, and are expected to have mastered basic swimming skills. The program is designed to refine basic skills, condition, and improve swimming times. All classes are taught by Mira Costa High School Aquatics Athletes under the supervision of Coach Jon Reichardt. This is a fundraiser for the Mustang Aquatics Boosters. For more information, go to mustangaquatics.org or email Joe Anderson at joe@54joe.com. SPACE IS LIMITED—first come first serve!

Swimmer Name _____ Parent Name _____

Swimmer Age _____ Male / Female Daytime Phone _____

Session (circle) #1 #2 #3 All PURPOSE (check one): JG Test Prep _____ Returning JG _____

In consideration of my child's voluntary participation in the Junior Lifeguard Training Program, I, the undersigned parent or guardian of _____ hereby acknowledge and voluntarily assume all risks of bodily injury, personal injury, property damage or wrongful death that may arise out of or in any way connected with this program, and release and discharge the organizers and sponsors of the Junior Lifeguard Training Program as well as the MBX Foundation, Inc. ("Foundation"), their partners, the Manhattan Beach Unified School District ("District") and each of their agents, officers and employees from any and all claims for losses, injuries, damages or liabilities, including personal injury and injury to personal property arising out of or attributable to my child's participation in this event/activity. I acknowledge that my child is in good physical condition for this program. I, for myself, my heirs, executors, administrators assigns, hereby release, waive, discharge and relinquish any action or causes of action, aforesaid, which may hereafter arise for me and for my estate, and agree that under no circumstances will I, or my heirs, executors, administrators, and assigns prosecute, present any claim for personal injury, bodily injury, property damage, or wrongful death against the Manhattan Beach Unified School District, the Mustang Aquatics Boosters, the MBX Foundation, and or any of their officers, employees, or volunteers. This waiver shall not apply to any occurrences that may arise solely out of the negligence of the District, the Foundation, their employees or agents. In the event of illness or injury, I do hereby consent to whatever x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care and emergency transportation considered necessary in the best judgment of the attending physician, surgeon or dentist and performed under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

Parent/Guardian Signature _____ Date _____

Parent Email Address: _____

Name of Parent Guardian PRINT _____

For Office Use Only: Group # _____ Check # _____ Cash _____